Preventing & reducing the risk of GBV in emergencies:

Lessons learned and uptake from the first 18 months of roll-out of the IASC Guidelines on Integrating Gender-based Violence Interventions in Humanitarian Action ("GBV Guidelines")

SVRI Forum 2017, Rio de Janeiro
Agenda

• (Re)introduction to the GBV Guidelines
• Baseline survey findings
• Lessons learned from 18 months of roll-out
• Looking ahead
Purpose

To assist humanitarian actors and communities affected by armed conflict, natural disasters and other humanitarian emergencies to:

*coordinate, plan, implement, monitor and evaluate essential actions for the prevention and mitigation of gender-based violence (GBV) across all sectors of humanitarian response.*
Target Audience

Primarily non-GBV specialists:

• Builds on existing sector standards
• Should not add to workloads: Meant to be used as a mainstreaming tool to make current programming safer and more effective
Implementation Support Team

Global Coordinator (IRC/UNICEF)

Training Specialist: IOM (Spanish)

Training Specialist: UNFPA (Arabic)

Training Specialist*: UNFPA (French)

IM Specialist: UNICEF

Sector support specialist: UNICEF

Emergency response: UNICEF
IASC Guidelines for Integrating Gender-Based Violence Interventions in Humanitarian Action

Global implementation from 2016 to 2017

The IASC GBV Guidelines were revised from the 2002 edition by an inter-agency Task Team led by UNHCR and UNIFPA, and were endorsed by the IASC in 2015. The Guidelines are now being rolled out globally, in line with a detailed Implementation Strategy and under the guidance of an inter-agency Reference Group.

The purpose of the GBV Guidelines is to assist humanitarian actors and communities affected by armed conflict, natural disasters and other humanitarian emergencies to coordinate, plan, implement, monitor and evaluate essential actions for the prevention and mitigation of GBV across all sectors of humanitarian response. In supporting humanitarian stakeholders, the goals of the GBV Guidelines are to:

- Reduce risk of GBV by implementing GBV prevention and mitigation strategies from pre-emergency to recovery.
- Promote safety by strengthening national and community-based systems, and by ensuring survivors have access to specialized care and support.
- Ensure that GBV interventions are gender-sensitive and that all sectors and societies by supporting local and national capacity to create lasting solutions to the problem of GBV.

As of August 2017, the inter-agency Implementation Support Team has trained 2,363 humanitarian practitioners in 16 countries and in more than 11 sectors.

Baseline surveys

• **Background to the surveys**

• **Key Finding #1**: non-GBV specialists self-report having knowledge and confidence to address GBV issues.

• **Key Finding #2**: An overwhelming majority of respondents have a positive attitude towards their, or their sector/cluster’s, role and responsibility in addressing GBV.

• **Key finding #3**: the top 2 challenges for increased engagement on GBV issues for non-GBV specialists are (1) sector-specific priorities and (2) human resources/capacity in-house.
Lessons learned (sample)

• **Sector ownership** of GBV integration is crucial

• Leads to:
  • Concrete links with inter-agency, cross-sectoral processes such as the HRP
  • Increased accountability among sector practitioners and partners
  • Improved program quality and program outcomes
Lessons learned (sample)

• Critical to **target multiple levels** and types of actors @ field and capital

• **Engagement of cluster coordinators** from the outset is crucial to stronger uptake of the GL recommendations

• Consider developing **2-way focal point system** to ensure technical quality AND promote sector-level accountability
Looking ahead: key priorities 2017/18

1. **Capacity-building**: in-depth regional workshops with accompanying pilot projects; focus on building agency and cluster/sector accountability

2. **Donor toolkit**: promoting GBV integration in grant making and allocations

3. **Focal point pilot in South Sudan**: structured model for integrating GBV prevention/risk mitigation into non-specialized sector programming

4. **Strengthening referrals for non-GBV specialists**: developing guidance for survivor support in settings lacking GBV specialized services

5. **Systems strengthening**: tailoring the GBV Guidelines to preparedness contexts, development settings, urban areas and fragile settings.
Additional Resources

• English, Arabic, French, Spanish, Greek and Burmese* versions available; Russian pending

• Comprehensive book, TAGs, training and supporting materials downloadable at www.gbvguidelines.org

• Additional tools/resources being to be added to website over time: check back often!

(*unofficial translation)
Thank you!

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